VOLENTINE FRANCOS, P.L.L.C. (9/2001)

DECLARATION AND POWER OF ATTORNEY FOR U.S. PATENT APPLICATION

	☑ Original ☐ Supplemen	tal Substitute P	CT Design	
to my name; that I verily believe	we that I am the original, first a l inventors are named below)	and sole inventor (if only o	citizenship are as stated below next ne name is listed below) or an original state is claimed and for which a patent	ginal,
TITLE: PAI	D CONDITIONER OF CM	PEQUIPMENT		
of which is described and claim	ed in:			
the attached specif	ication, or			
	the application Serial Noendments through	filed (if applicable)	, or	
	a International Application No ded on		filed,	
I hereby state that I have review amended by any amendment(s)		t of the above-identified spe	ecification, including the claims, as	5
accordance with Title 37, Code			the examination of this applicatio	n in
accordance with Title 37, Code I hereby claim foreign priority	e of Federal Regulations, §1.56 benefits under Title 35, United atent or inventor's certificate l	5(a). d State Code, §119 (a00119 isted below and have also i	(and§172 if t⊞172 ifthis applicat dentifШscentificate listed below	ionis
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And I hereby appoint Adam C. Volentine, Reg. No. 33289 and William S. Francos, Reg. No. 38,456, and the firm of *VOLENTINE FRANCOS*, *P.L.L.C.*, jointly and severally, attorneys to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith.

I hereby authorize the U.S. attorneys named herein to accept and following instructions from

as to any action to be taken in the U.S. Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys and myself. In the event of a change in the persons from whom instructions may be taken, the U.S. attorneys named herein will be so notified by me.

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o xy 4	Family Name	FIRST GIVEN NAME	SECOND GIVEN NAME
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	Address	Стт	STATE OR COUNTRY ZIP CODE
Post Office Address			
Full Name of 6 th	FAMILY NAME	First Given Name	SECOND GIVEN NAME
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RESIDENCE & CITIZENSHIP	Спу	STATE OR COUNTRY	COUNTRY OF CITIZENSHIP
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